

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION             | INITIALS         | ID NO. | DATE     |
|----------------------|------------------|--------|----------|
| FEE DETERMINATION    | <i>MULLERSON</i> |        | 07-09-01 |
| O.I.P.E. CLASSIFIER  |                  | 4/3    | 7/16/01  |
| FORMALITY REVIEW     | <i>TAP</i>       | 140    | 8-20-01  |
| RESPONSE FORMAL VIEW |                  |        |          |

INDEX OF CLAIMS

BEST AVAILABLE COPY

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here

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36-617  
 8-21-01